

## AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE

PAGE OF PAGES

1

2

2. AMENDMENT/MODIFICATION NO.

P00002

3. EFFECTIVE DATE

See Block 16C

4. REQUISITION/PURCHASE REQ. NO.

5. PROJECT NO. (If applicable)

6. ISSUED BY

CODE

HHS/OS/ASPR/BARDA

7. ADMINISTERED BY (If other than Item 6)

CODE

ASPR-BARDA02

US DEPT OF HEALTH & HUMAN SERVICES  
ASST SEC OF PREPAREDNESS & RESPONSE  
ACQ MANAGEMENT, CONTRACTS, & GRANTS  
O'NEILL HOUSE OFFICE BUILDING  
Washington DC 20515

US DEPT OF HEALTH & HUMAN SERVICES  
ASST SEC OF PREPAREDNESS & RESPONSE  
ACQ MANAGEMENT, CONTRACTS, & GRANTS  
O'NEILL HOUSE OFFICE BUILDING  
Washington DC 20515

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)

SEPSIS ALLIANCE 1536120  
Attn: ANGELA GOLDSTEIN  
SEPSIS ALLIANCE  
1855 1ST AVE STE 102  
SAN DIEGO CA 921012650

9A. AMENDMENT OF SOLICITATION NO.

9B. DATED (SEE ITEM 11)

10A. MODIFICATION OF CONTRACT/ORDER NO.  
HHSO100201900021C

10B. DATED (SEE ITEM 13)

01/24/2019

CODE 1536120

FACILITY CODE

## 11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or electronic communication which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or electronic communication, provided each letter or electronic communication makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

2019.1992019.25106

## 13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation data, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
X	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: FAR 52.243-1 Alt. V Changes - Fixed Price (Apr 1984)
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor ☐ is not ☒ is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

Tax ID Number: 38-3110993

DUNS Number: 008934084

A. In accordance with FAR 52.243-1 Alt. V Changes - Fixed Price (Apr 1984), the purpose of this modification is to make the following changes to the contract

1) Revise Attachment 1 - Statement of Work to remove one (1) module from the SOW and replace with two (2) webinars;

2) Revise Attachment 3- Schedule of Payments and update AIMs, update payment schedule and add an additional AIM. Changes are within scope and both parties mutually agree to all changes.

3) A No-Cost-Extension (NCE) on the Period of Performance End Date from 10/31/2020 to 04/30/2021

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

THOMAS HEYDANN, PRESIDENT

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

TROY G. FRANCIS

15B. CONTRACTOR/OFFEROR

15C. DATE SIGNED

5-7-20

16B. UNITED STATES OF AMERICA

16C. DATE SIGNED

5/7/2020

(Signature of person authorized to sign)

(Signature of Contracting Officer)

Previous edition unusable

STANDARD FORM 30 (REV. 11/2016)  
Prescribed by GSA FAR (48 CFR) 53.243

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED HHSO100201900021C/P00002	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
SEPSIS ALLIANCE 1536120

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	B. This is a bilateral modification. The total dollar amount of all CLINs that are currently being performed on the contract remain unchanged. The parties bilaterally agree to the changes in the terms and conditions of the contract. All other terms and conditions of the contract remain unchanged. Delivery Location Code: HHS/OS/ASPR HHS/OS/ASPR 200 C St SW WASHINGTON DC 20201 US  Appr. Yr.: 2019 CAN: 1992019 Object Class: 25106 Period of Performance: 02/01/2019 to 04/30/2021  Change Item 1 to read as follows (amount shown is the obligated amount):				
1	ASPR-19-00468 - Base Period funding for Sepsis Alliance  Delivery: 02/01/2019				0.00
	Change Item 2 to read as follows (amount shown is the obligated amount):				
2	Supplemental funding for 508 Compliance work under CLIN 0001. Obligated Amount: \$0.00  Delivery: 06/06/2019				0.00

## DRIVE EZ-BAA STANDARD CONTRACT (v.2.0)

### PART I – THE SCHEDULE

#### SECTION B – SUPPLIES OR SERVICES AND PRICES/COSTS

##### B.1. BRIEF DESCRIPTION OF SUPPLIES OR SERVICES

In 2018, the Biomedical Advanced Research and Development Authority (BARDA) established the Division of Research, Innovation, and Venture (DRIVE). The mission of DRIVE is to accelerate innovations, and improve the availability of transformative products and technologies to protect Americans from natural and intentional health security threats.

The following contract and the Statement of Work (addressed in Section C), further the mission and goals of DRIVE.

##### B.2 PRICE

- a. **FIRM FIXED PRICE:** The firm fixed price of the base period of the contract is \$547,248.

CLIN	Description	Period of Performance	Unit of Measure	Quantity	Total Price
0001	Life-Saving Sepsis Education Across the Continuum of Care	01 February 2019 through 30 April 2021	Unit	1	\$547,248

**B.3.** Through negotiations, the Government and Contractor agreed that a total price of \$781,782 would be a fair and reasonable estimate of Contractor's actual costs of performance. Contractor has agreed to cover \$234,534 of the overall price for their portion of a cost-share. Accordingly, in return for successful completion and delivery of CLIN 0001, the Government's portion will be \$547,248.

##### B.4. ADVANCE UNDERSTANDINGS

- a. **Sharing of contract deliverables within United States Government (USG)**

In an effort to build a robust medical countermeasure pipeline through increased collaboration, the Government may share technical deliverables with Government entities responsible for Medical Countermeasure Development. In accordance with recommendations from the Public Health Emergency Medical Countermeasure Enterprise Review, agreements established in the Integrated Portfolio Advisory Committee (PAC) Charter, and agreements between BARDA and the Department of Defense, the National Institutes of Health, the Centers for Disease Control, and the Food and Drug Administration, BARDA may share technical deliverables and test results created in the performance of this Contract with colleagues within the Integrated Portfolio. This advance understanding does not authorize the Government to share financial information outside of the United States Government. The Contractor is advised to review the terms of FAR 52.227-14, Rights in Data – General, regarding the government's rights to deliverables submitted during performance as well as the government's rights to data contained within those deliverables.

b. **Approval of Human and Animal Protocols**

This contract:

1. ☐ **Will** or X **Will Not** include clinical trials (e.g. human protocols); and
2. ☐ **Will** or X **Will Not** include non-clinical trials (e.g. animal protocols).

**Accordingly, if checked to indicate either class of studies is *not* included under the subject contract, all of the corresponding FDA clauses/obligations included in this document are hereby self-deleting.**

The Contractor shall submit all human and animal protocols and human informed consent documents as referenced under this Contract to the COR for review and approval **prior** to seeking other approvals (Institutional Review Board, Human Use Committee, Institutional Animal Care and Use Committee). The Government requires no fewer than eight (8) business days to perform a review. The Contractor shall take this review time into account and submit protocols as early as possible to avoid delays. The Government's comments and feedback shall be addressed prior to approval. The COR will review and provide approval of protocols. Human informed consents shall also be submitted and reviewed with any human protocol.

c. **Rights in Data**

See Section I – Contract Clauses

## **SECTION C - DESCRIPTION/SPECIFICATIONS/WORK STATEMENT**

### **C.1. STATEMENT OF WORK**

See Section J, Attachment 1 (Statement of Work) as agreed upon by the Government and Contractor, and the Reporting Requirements outlined by “DRIVE Digital Resources” accessed via [www.drive.hhs.gov](http://www.drive.hhs.gov) at a future date.

#### **SECTION D – PACKAGING, MARKING, AND SHIPPING**

All deliverables required under this contract shall be packaged, marked and shipped in accordance with Government specifications and Section F. At a minimum, all deliverables shall be marked with the contract number and Contractor name. The Contractor shall guarantee that all required materials shall be delivered in immediate usable and acceptable condition

Unless otherwise specified by the CO, delivery of reports to be furnished to the Government under this contract (including invoices) shall be delivered to the CO and COR electronically along with a concurrent email notification to the CO and COR (as defined in Section F.3. Electronic Submission) summarizing the electronic delivery.

## **SECTION E – INSPECTION AND ACCEPTANCE**

### **E.1. FAR 52.252-2, CLAUSES INCORPORATED BY REFERENCE (FEBRUARY 1998)**

See Section I for a complete list of clauses incorporated by reference.

### **E.2. DESIGNATION OF GOVERNMENT PERSONNEL**

For the purpose of this Section E, the designated Contracting Officer's Representative (COR) is the authorized representative of the Contracting Officer. The COR will assist in resolving technical issues that arise during performance. The COR however is not authorized to change any contract terms or authorize any changes in the Statement of Work or modify or extend the period of performance, or authorize reimbursement of any costs incurred during performance.

### **E.3. INSPECTION, ACCEPTANCE AND CONTRACT MONITORING**

Inspection and acceptance of the product, services, and documentation called for herein shall be accomplished by the Contracting Officer or a duly authorized representative. Delivery, technical inspection and acceptance will be take place at a location designated by the Contracting Officer or at:

Office of the Assistant Secretary for Preparedness and Response  
Biomedical Advanced Research and Development Authority  
O'Neill House Office Building  
Washington, DC 20515

At the discretion of the Government and independent of activities conducted by the Contractor, with 48 hours' notice to the Contractor, the Government reserves the right to conduct site visits and inspections related to this Contract on an as needed basis during normal business hours, including collection of product samples and intermediates held at the location of the Contractor, or its subcontractor. All costs reasonably incurred by the Contractor and subcontractor for such visit and/or inspection shall be allowable costs subject to the Allowable cost requirements in FAR Subpart 31.2. The Contractor shall coordinate these visits and shall have the opportunity to accompany the Government on any such visits. Under time-sensitive or critical situations, the Government reserves the right to suspend the 48 hour notice to the Contractor. The areas included under the site visit could include, but are not limited to: security, regulatory and quality systems, manufacturing processes and cGMP/GLP/GCP compliance related to activities funded under this Contract.

If the Government, Contractor, or other party identifies any issues during an audit, the Contractor shall capture the issues, identify potential solutions, and provide a report to the Government for review and acceptance

- If issues are identified during the audit, the Contractor shall submit a report to the CO and COR within five (5) business days detailing the finding and corrective action(s) of the audit.
- COR and CO will review the report and provide a response to the Contractor within ten (10) business days.
- Once corrective action is completed, the Contractor will provide a final report to the CO and COR.

## SECTION F – DELIVERIES OR PERFORMANCE

### F.1. ESTIMATED PERIOD OF PERFORMANCE

The estimated period of performance for this contract shall be consistent with the dates set forth in the Base Period in Section B.2.

### F.2. DELIVERABLES

Successful performance of the final contract shall be deemed to occur upon completion of performance of the work set forth in Attachment 1 of this contract and upon delivery and acceptance, as required by the Attachment 1, by the COR, and of each of the deliverables described in Section C and Section F below.

All deliverables and reporting documents listed within this Section shall be delivered electronically to the CO, CS, and the COR unless otherwise specified by the CO.

Number	Deliverable	Description	Due
1	Kickoff Meeting	The Contractor shall complete a Kickoff meeting after contract award. Both as a videoconference and an in-person meeting.  Contractor shall provide itinerary and agenda at least 2 business days in advance of meeting.	Within 30 calendar days of award date for videoconference and 90 days for an in-person meeting
2	Monthly Teleconference and Ad-Hoc Meetings (as needed)	The Contractor shall participate in teleconferences every month with BARDA to discuss the performance of the contract. Interim ad-hoc meetings may also be scheduled as needed. The Contractor shall provide slides 24 hours in advance of scheduled meeting	Held monthly. Additional ad-hoc meetings to be held as needed  Minutes provided by contractor within 7 business days of the meeting.
3	Monthly Reports	Submit monthly reports summarizing data and progress to date on each aim in the SOW.	Due the 15 <sup>th</sup> of the month following the preceding reporting month. The COR and CO will review the monthly reports with the Contractor and provide feedback
4	Product/Technology Transition Strategy	Contractor shall provide a 1-2 page summary document containing a Transition Strategy. The Transition Strategy should provide a strategic business and technical plan for further development and transitioning the product and/or technology	Contractor shall provide the Transition Strategies 30 days prior to the end of each year of the Base Period.
5	Sample Prototype	If applicable and available, the Contractor shall deliver sample prototype/examples to DRIVE for display purposely ONLY. Prototype/examples are not intended for clinical or non-clinical uses.	Prototype shall be delivered 30 days from request if available



6	Final Data Submission Package	<p>Contractor must submit a data package consisting of all raw data produced under this contract. Data may be used by DRIVE for analysis, evaluation, shared with other agencies, or shared outside of the government consistent with FAR 52.227-14. This submission package must be delivered in a non-proprietary format.</p> <p>If clinical trial data is included, that data must be provided consistent with applicable privacy laws to protect personally identifiable information (PII).</p>	Contractor will submit at least 15 days prior to contract end date. Partial data-sets may also be requested for delivery prior to submission of the Final Data Submission Package.
7	Draft Final Report & Final Report	These reports are to include a summation of the work performed and results obtained for the entire contract period of performance.	<p>Draft Final Report to the COR and CO 30 calendar days prior to contract end date,</p> <p>Final Report shall be delivered on or before the completion date of the contract.</p>
8	Supplemental Technical Documents, Raw Data, or Data Analysis	Upon request and also as part of deliverables the Contractor shall provide raw data, data analysis, or data report to BARDA.	Contractor shall provide the Technical Documents upon request from the CO or COR

**a. Detailed Descriptions of Select Contract Deliverables**

**Technical Progress Reports**

In addition to those reports required by the other terms of this contract, the Contractor shall prepare and submit the following reports in the manner stated below and in accordance with this Article F of this contract.

**i. Monthly Progress Report**

The contents of the monthly report will be agreed upon between Contractor and COR, such that a minimum administrative burden is necessary to document technical progress.

**iii. Draft Final Report and Final Report**

These reports are to include a summation of the work performed and results obtained for the entire contract period of performance. This report shall be in sufficient detail to describe comprehensively the results achieved. The Draft Final Report and Final Report shall be submitted in accordance with the DELIVERIES Article in SECTION F of the contract. The Draft Final Report and the Final Report shall be submitted in accordance with the dates set forth in the tables above. The report should conform to the following format:

1. Cover page to include the contract number, contract title, performance period covered, Contractor's name and address, telephone number, fax number, email address and submission date.
2. SECTION I: EXECUTIVE SUMMARY - Summarize the purpose and scope of

the contract effort including a summary of the major accomplishments relative to the specific activities set forth in the Statement of Work.

3. SECTION II: RESULTS - A detailed description of the work performed related the Gantt chart, the results obtained, and the impact of the results on the scientific and/or public health community including a listing of all manuscripts (published and in preparation) and abstracts presented during the entire period of performance and a summary of all inventions.

Draft Final Report: The Contractor is required to submit the Draft Final Report to the COR and CO. The COR and CO will review the Draft Final Report and provide the Contractor with comments.

Final Report: The final version shall include or address the COR's and CO's written comments on the draft report. Final Report shall be submitted on or before the completion date of the contract.

- Y Summary of Salient Results: Within the Final Report, the Contractor shall submit Final Report, a summary (not to exceed 200 words) of salient results achieved during the performance of the contract.

**b. Periodic Document Review**

The CO and COR reserve the right to request a non-proprietary technical document for distribution within the Government. Contractor shall provide technical document within 10 business days of CO or COR request. Contractor can request additional time on an as needed basis. If edits are recommended, the Contractor must address, in writing, concerns raised by BARDA in writing.

**F.3 SUBJECT INVENTION REPORTING REQUIREMENT**

All reports and documentation required by FAR Clause 52.227-11, Patent Rights-Ownership by the Contractor, including, but not limited to, the invention disclosure report, the confirmatory license, and the Government support certification, one copy of an annual utilization report, and a copy of the final invention statement, shall be submitted to the Contracting Officer. A final invention statement (see FAR 27.303 (b)(2)(ii)) shall be submitted to the Contracting Officer on the expiration date of the contract.

If no invention is disclosed or no activity has occurred on a previously disclosed invention during the applicable reporting period, a negative report shall be submitted to the Contracting Officer at the address listed above.

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## **SECTION G - CONTRACT ADMINISTRATION DATA**

### **G.1. CONTRACTING OFFICER**

The following Contracting Officer (CO) will represent the Government for the purpose of this contract:

Troy Francis  
Contracting Officer  
HHS/ASPR/AMCG  
O'Neill House Office Building  
Washington, DC 20515  
202-258-7210 (Cell)  
[troy.francis@hhs.gov](mailto:troy.francis@hhs.gov)

- 1) The Contracting Officer is the only individual who can legally commit the Government to the expenditure of public funds. No person other than the Contracting Officer can make any changes to the terms, conditions, general provisions, or other stipulations of this contract.
- 2) The Contracting Officer is the only person with the authority to act as agent of the Government under this contract. Only the Contracting Officer has authority to (1) direct or negotiate any changes in the statement of work; (2) modify or extend the period of performance; (3) change the delivery schedule; (4) authorize reimburse to the Contractor of any costs incurred during the performance of this contract; (5) otherwise change any terms and conditions of this contract.
- 3) No information other than that which may be contained in an authorized modification to this contract, duly issued by the Contracting Officer, which may be received from any person employed by the US Government, other otherwise, shall be considered grounds for deviation from any stipulation of this contract.
- 4) The Government may unilaterally change its CO designation, after which it will notify the Contractor in writing of such change.

### **G.2. CONTRACTING OFFICER'S REPRESENTATIVE (COR)**

The following Contracting Officer's Representative (COR) will represent the Government for the purpose of this contract:

Kimberly Sciarretta, PhD  
COR  
HHS/ASPR/BARDA  
O'Neill House Office Building  
Washington, DC 20515  
202-603-5728 (Cell)  
[kimberly.sciarretta@hhs.gov](mailto:kimberly.sciarretta@hhs.gov)

The COR is responsible for:

- 1) Monitoring the Contractor's technical progress, including the surveillance and assessment of performance and recommending to the Contracting Officer changes in requirements;
- 2) Assisting the Contracting Officer in interpreting the statement of work and any other technical performance requirements;
- 3) Performing technical evaluation as required;
- 4) Performing technical inspections and acceptances required by this contract; and
- 5) Assisting in the resolution of technical problems encountered during performance. The Government may unilaterally change its COR designation, after which it will notify Contractor in writing of such change.

### G.3. KEY PERSONNEL

Per HHSAR 352.237-75 incorporated in Section I of this contract, the following individuals are considered to be essential to the work being performed hereunder:

Name	Title
Tom Heymann	Executive Director
Sara McMannus	Webinar Coordinator
Lisa Anderson	Research Associate

The key personnel specified in this contract are considered to be essential to work performance. At least 30 days prior to diverting any of the specified individuals to other programs or contracts (or as soon as possible, if an individual must be replaced, for example, as a result of leaving the employ of the Contractor), the Contractor shall notify the Contracting Officer and shall submit comprehensive justification for the diversion or replacement request (including proposed substitutions for key personnel) and qualifications of the individual proposed as a substitute to permit evaluation by the Government of the impact on performance under this contract. The Contractor shall not divert or otherwise replace any key personnel without the written consent of the Contracting Officer. The Government may modify the contract to add or delete key personnel at the request of the Contractor or Government.

### G.4. INVOICING

- a) Invoices will be submitted for each deliverable in accordance with Attachment 3. The line entries for subdivisions of work and elements of cost (expenditure categories), which shall be reported within the total contract, are discussed in Section J. In the event that a deliverable is not submitted or not deemed acceptable for approval by the COR and CO, the CO reserve the right to not process the invoice and payment until an acceptable deliverable has been submitted and approved by the COR and CO.
- b) Invoices must include the cumulative total expenses to date, adjusted (as applicable) to show any amounts suspended by the Government.
- c) The Contractor shall submit an electronic copy of the payment request to the approving official instead of a paper copy. The payment request shall be transmitted as an attachment via e-mail to the address listed above in one of the following formats: MSWord, MS Excel, or Adobe Portable Document Format (PDF). Only one payment request shall be submitted per e-mail and the subject line of the e-mail shall include the Contractor's name, contract number, and unique invoice number. Contractor invoices shall conform to the form, format, and content requirements of the instructions for Invoice/Financing requests and Contract Financial Reporting, and be sent to the following points of contact:

PSC
<a href="mailto:PSC_Invoices@psc.hhs.gov">PSC_Invoices@psc.hhs.gov</a> & "DRIVE Digital Resources"

- d) An electronic copy of the payment request shall be uploaded into the designated digital repository (DRIVE digital resource) and an e-mail notification of the upload will be provided to the CO and COR.

**All invoice submissions shall be in accordance with FAR Clause 52.232-25, Prompt Payment (Oct 2008)**

### G.5. POST AWARD EVALUATION OF CONTRACTOR PERFORMANCE

#### **Contractor Performance Evaluations**

Interim and final evaluations of Contractor performance will be prepared on this contract in accordance with

FAR Subpart 42.15. The final performance evaluation will be prepared at the time of completion of work. In addition to the final evaluation, an interim evaluation shall be submitted annually.

Interim and final evaluations will be provided to the Contractor as soon as practicable after completion of the evaluation. The Contractor will be permitted thirty days to review the document and to submit additional information or a rebutting statement. If agreement cannot be reached between the parties, the matter will be referred to an individual one level above the Contracting Officer whose decision will be final.

Copies of the evaluations, Contractor responses, and review comments, if any, will be retained as part of the contract file, and may be used to support future award decisions.

#### **Electronic Access to Contractor Performance Evaluations**

Contractors that have Internet capability may access evaluations through a secure Web site for review and comment by completing the registration form that can be obtained at the following address:

<http://www.cpars.csd.disa.mil/cparsmain.htm>

The registration process requires the Contractor to identify an individual that will serve as a primary contact and who will be authorized access to the evaluation for review and comment. In addition, the Contractor will be required to identify an alternate contact that will be responsible for notifying the cognizant contracting official in the event the primary contact is unavailable to process the evaluation within the required 30-day time frame.

#### **G.6. CONTRACT COMMUNICATIONS/CORRESPONDENCE (JULY 1999)**

The Contractor shall identify all correspondence, reports, and other data pertinent to this contract by imprinting the contract number from Page 1 of the contract.

#### **G.7. GOVERNMENT PROPERTY**

In addition to the requirements of the Government Property clause incorporated in Section I of this contract, if applicable, the Contractor shall comply with the provisions of HHS Publication, "HHS Contracting Guide for Control of Government Property," which is incorporated into this contract by reference. This document can be accessed at:

<http://www.hhs.gov/hhsmanuals/> (HHS Logistics Management Manual)

Among other issues, this publication provides a summary of the Contractor's responsibilities regarding purchasing authorizations and inventory and reporting requirements under the contract.

Notwithstanding the provisions outlined in the HHS Publication, "HHS Contracting Guide for Control of Government Property," which is incorporated in this contract in paragraph 1. above, the Contractor shall use the form entitled, "Report of Government Owned, Contractor Held Property" for submitting summary reports required under this contract, as directed by the Contracting Officer or his/her designee. This form is attached to this contract (see Section J- List of Attachments).

## **SECTION H - SPECIAL CONTRACT REQUIREMENTS**

If the proposed effort involves animal use or human subject research (as identified above in Section B), additional provisions will be provided during negotiations or via the “DRIVE Digital Resources” accessed via [www.drive.hhs.gov](http://www.drive.hhs.gov).

### **H.1 [Reserved]**

### **H.2 REPORTING MATTERS INVOLVING FRAUD, WASTE AND ABUSE**

Anyone who becomes aware of the existence or apparent existence of fraud, waste and abuse in BARDA funded programs should report such matters to the HHS Inspector General's Office in writing or on the Inspector General's Hotline. The toll free number is 1-800-HHS-TIPS (1-800- 447-8477). All telephone calls will be handled confidentially. The e-mail address is [Htips@os.dhhs.gov](mailto:Htips@os.dhhs.gov) and the mailing address is:

Office of Inspector General  
Department of Health and Human Services TIPS  
HOTLINE  
P.O. Box 23489 Washington, D.C. 20026

### **H.3 PROHIBITION ON CONTRACTOR INVOLVEMENT WITH TERRORIST ACTIVITIES**

The Contractor acknowledges that U.S. Executive Orders and Laws, including but not limited to 13224 and P.L. 107-56, prohibit transactions with, and the provision of resources and support to, individuals and organizations associated with terrorism. It is the legal responsibility of the Contractor to ensure compliance with these Executive Orders and Laws. This clause must be included in all subcontracts issued under this contract.

### **H.4 IDENTIFICATION AND DISPOSITION OF DATA**

The Contractor will be required to provide certain data generated under this contract to the Department of Health and Human Services (DHHS). DHHS reserves the right to review any other data determined by DHHS to be relevant to this contract. The Contractor shall keep copies of all data required by the Food and Drug Administration (FDA) relevant to this contract for the time specified by the FDA.

### **H.5 EXPORT CONTROL NOTIFICATION**

Contractors are responsible for ensuring compliance with all export control laws and regulations that may be applicable to the export of and foreign access to their proposed technologies. Contractors may consult with the Department of State with any questions regarding the International Traffic in Arms Regulation (ITAR) (22 CFR Parts 120-130) and /or the Department of Commerce regarding the Export Administration Regulations (15 CFR Parts 730-774).

### **H.6 CONFLICT OF INTEREST**

The Contractor represents and warrants that, to the best of the Contractor's knowledge and belief, there are no relevant facts or circumstances which could give rise to an organizational conflict of interest, as defined in FAR 2.101 and Subpart 9.5, or that the Contractor has disclosed all such relevant information. Prior to commencement of any work, the Contractor agrees to notify the Contracting Officer promptly that, to the best of its knowledge and belief, no actual or potential conflict of interest exists or to identify to the Contracting Officer any actual or potential conflict of interest the firm may have. In emergency situations, however, work may begin but notification shall be made within five (5) working days. The Contractor agrees that if an actual or potential organizational conflict of interest is identified during performance, the Contractor shall promptly make a full disclosure in writing to the Contracting Officer. This disclosure shall include a description of actions which the Contractor has taken or proposes to take, after consultation with the Contracting Officer, to avoid, mitigate, or neutralize the actual or potential conflict of interest. The

Contractor shall continue performance until notified by the Contracting Officer of any contrary action to be taken. Remedies include termination of this contract for convenience, in whole or in part, if the Contracting Officer deems such termination necessary to avoid an organizational conflict of interest. If the Contractor was aware of a potential organizational conflict of interest prior to award or discovered an actual or potential conflict after award and did not disclose it or misrepresented relevant information to the Contracting Officer, the Government may terminate the contract for default, debar the Contractor from Government contracting, or pursue such other remedies as may be permitted by law or this contract.

#### **H.7 INSTITUTIONAL RESPONSIBILITY REGARDING INVESTIGATOR FINANCIAL CONFLICTS OF INTEREST**

The Contractor shall comply with the requirements of 45 CFR Part 94, Responsible Prospective Contractors, which promotes objectivity in research by establishing standards to ensure that Investigators (defined as the project director or principal Investigator and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of research funded under BARDA contracts, or proposed for such funding, which may include, for example, collaborators or consultants) will not be biased by any Investigator financial conflicts of interest.

If the failure of an Investigator to comply with an Institution's financial conflicts of interest policy or a financial conflict of interest management plan appears to have biased the design, conduct, or reporting of the BARDA-funded research, the Contractor must promptly notify the Contracting Officer of the corrective action taken or to be taken. The Contracting Officer will consider the situation and, as necessary, take appropriate action or refer the matter to the Contractor for further action, which may include directions to the Contractor on how to maintain appropriate objectivity in the BARDA-funded research project.

The Contracting Officer and/or HHS may inquire at any time before, during, or after award into any Investigator disclosure of financial interests, and the Contractor's review of, and response to, such disclosure, regardless of whether the disclosure resulted in the Contractor's determination of a financial conflict of interests. The Contracting Officer may require submission of the records or review them on site. On the basis of this review of records or other information that may be available, the Contracting Officer may decide that a particular financial conflict of interest will bias the objectivity of the BARDA-funded research to such an extent that further corrective action is needed or that the Institution has not managed the financial conflict of interest in accordance with 45 CFR Part 94. The issuance of a Stop Work Order by the Contracting Officer may be necessary until the matter is resolved.

If the Contracting Officer determines that BARDA-funded clinical research, whose purpose is to evaluate the safety or effectiveness of a drug, medical device, or treatment, has been designed, conducted, or reported by an Investigator with a financial conflict of interest that was not disclosed managed or reported the Contractor shall require the Investigator involved to disclose the financial conflict of interest in each public presentation of the results of the research and to request an addendum to previously published presentations.

#### **H.8 NEEDLE DISTRIBUTION**

The Contractor shall not use contract funds to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

#### **H.9 RESTRICTION ON ABORTIONS**

The Contractor shall not use contract funds for any abortion.

#### **H.12 DISSEMINATION OF FALSE OR DELIBERATELY MISLEADING INFORMATION**

The Contractor shall not use contract funds to disseminate information that is deliberately false or misleading.

### **H.13 CONFIDENTIALITY OF INFORMATION**

- a. Confidential information, as used in this article, means information or data of a personal nature about an individual, or proprietary information or data submitted by or pertaining to an institution or organization.
- b. The Contracting Officer and the Contractor may, by mutual consent, identify elsewhere in this contract specific information and/or categories of information which the USG will furnish to the Contractor or that the Contractor is expected to generate which is confidential and providing further that the Government is not entitled to unlimited rights to that information pursuant to FAR 52.227-14. Similarly, the Contracting Officer and the Contractor may, by mutual consent, identify such confidential information from time to time during the performance of the contract. Failure to agree will be settled pursuant to the "Disputes" clause.
- c. If it is established elsewhere in this contract that information to be utilized under this contract, or a portion thereof, is subject to the Privacy Act, the Contractor will follow the rules and procedures of disclosure set forth in the Privacy Act of 1974, 5 U.S.C. 552a, and implementing regulations and policies, with respect to systems of records determined to be subject to the Privacy Act.
- d. Confidential information, as defined in paragraph (a) of this article, shall not be disclosed without the prior written consent of the individual, institution, or organization.
- e. Whenever the Contractor is uncertain with regard to the proper handling of material under the contract, or if the material in question is subject to the Privacy Act or is confidential information subject to the provisions of this article, the Contractor should obtain a written determination from the Contracting Officer prior to any release, disclosure, dissemination, or publication.
- f. The provisions of paragraph (d) of this article shall not apply to conflicting or overlapping provisions in other Federal, State or local laws.

### **H.14 ACCESS TO DOCUMENTATION/DATA**

The Government shall have physical and electronic access to all documentation and data generated under this contract, including: all data documenting Contractor performance; all data generated; all communications and correspondence with regulatory agencies and bodies to include all audit observations, inspection reports, milestone completion documents, and all Offeror commitments and responses. Contractor shall provide the Government with an electronic copy of all correspondence and submissions to the FDA within 5 business days of receipt. The Government shall acquire unlimited rights to all data funded under this contract in accordance with FAR Subpart 27.4 and FAR Clause 52.227-14.

### **H.15 ACKNOWLEDGMENT OF FEDERAL FUNDING**

Section 507 of P.L. 104-208 mandates that Contractors funded with Federal dollars, in whole or in part, acknowledge Federal funding when issuing statements, press releases, requests for proposals, bid solicitations and other documents. This requirement is in addition to the continuing requirement to provide an acknowledgment of support and disclaimer on any publication reporting the results of a contract funded activity.

#### **a. Publication and Publicity**

No information related to data obtained under this contract shall be released or publicized without providing BARDA with at least thirty (30) days advanced notice and an opportunity to review the proposed release or publication.

In addition to the requirements set forth in HHSAR Clause 352.227-70, Publications and Publicity incorporated by reference in Section I of this contract, Section 507 of P.L. 104-208 mandates that Contractors funded with Federal dollars, in whole or in part, acknowledge Federal funding when issuing statements, press releases, requests for proposals, bid solicitations and other documents.



Contractors are required to state:

- (1) The percentage and dollar amounts of the total program or project costs financed with Federal money and;
- (2) The percentage and dollar amount of the total costs financed by non-governmental sources. For purposes of this contract "publication" is defined as an issue of printed material offered for distribution or any communication or oral presentation of information, including any manuscript or scientific meeting abstract. Any publication containing data generated under this contract must be submitted for BARDA review no less than thirty (30) calendar days for manuscripts and fifteen (15) calendar days for abstracts before submission for public presentation or publication. Contract support shall be acknowledged in all such publications substantially as follows:

"This project has been funded in whole or in part with Federal funds from the Department of Health and Human Services; Office of the Assistant Secretary for Preparedness and Response; Biomedical Advanced Research and Development Authority, DRIVE, under the this contract."

b. **Press Releases**

Misrepresenting contract results or releasing information that is injurious to the integrity of BARDA may be construed as improper conduct. Press releases shall be considered to include the public release of information to any medium, excluding peer-reviewed scientific publications. With the exception of ad-hoc press releases required by applicable law or regulations, the Contractor shall ensure that the COR has received an advance copy of any press release related to the contract not less than two (2) business days prior to the issuance of the press release.

The Contractor shall acknowledge the support of the Department of Health and Human Service, Office of the Assistant Secretary for Preparedness and Response, Biomedical Advanced Research and Development Authority, whenever publicizing the work under this contract in any media by including an acknowledgment substantially as follows:

"This project has been funded in whole or in part with Federal funds from the Department of Health and Human Services; Office of the Assistant Secretary for Preparedness and Response; Biomedical Advanced Research and Development Authority, DRIVE, under this contract."

c. **Contractor Use of the Powered by DRIVE Logo**

- (a) For the limited purposes of the Contractor's participation related to the subject DRIVE contract, Contractor is permitted to use the following logo (the "Logo") for the period of the Term (or for a longer period, if agreed between the Parties), subject to the Contractor's full performance of the terms and conditions of the subject contract and provided that Contractor shall cease to use the Logo immediately upon BARDA's request.



- (b) The Contractor's use of the term "Powered by DRIVE" shall be subject to DRIVE Brand Guidelines.

- (c) Any other use of the DRIVE name, its Logo, servicemarks or trademarks, or any of its other distinguishable marks, whether registered or not, shall be limited to those granted by the express, written permission of the BARDA. Those to whom such permission is granted must agree that BARDA shall remain the final arbiter of the use of the mark or Logo.

**d. BARDA Use of Contractor Logo**

Contractor hereby grants BARDA/DRIVE the right to use Contractor's corporate logo (and other artwork as agreed to by the Parties), for presentations, internal and external websites, and other reasonable promotional and reporting uses relating to the Project during the Term (or for a longer period, if agreed between the Parties).

**H.16 PRIVACY ACT APPLICABILITY**

Notification is hereby given that the Contractor and its employees are subject to criminal penalties for violation of the Privacy Act to the same extent as employees of the Government. The Contractor shall assure that each of its employees knows the prescribed rules of conduct and that each is aware that he or she can be subjected to criminal penalty for violation of the Act. A copy of 45 CFR Part 5b, Privacy Act Regulations, may be obtained at <https://www.gpo.gov/fdsys/granule/CFR-2007-title45-vol1/CFR-2007-title45-vol1-part5b>

The Project Officer is hereby designated as the official who is responsible for monitoring contractor compliance with the Privacy Act.

The Contractor shall follow the Privacy Act guidance as contained in the Privacy Act System of Records number 09-25-0200.

**H.17 [Reserved]**

**H.18 [Reserved]**

**H.19 BARDA AUDITS**

Contractor shall accommodate periodic or reasonable ad hoc site visits during normal business hours by the Government with forty-eight (48) hours advance notice. If the Government, the Contractor, or other parties identifies any issues during an audit, the Contractor shall capture the issues, identify potential solutions, and provide a report to the Government.

- If issues are identified during the audit, Contractor shall submit a report to the CO and COR detailing the finding and corrective action(s) within 10 business days of the audit.
- COR and CO will review the report and provide a response to the Contractor with ten (10) business days.
- Once corrective action is completed, the Contractor will provide a final report to the CO and COR.

**H.20 RESTRICTION ON EMPLOYMENT OF UNAUTHORIZED ALIEN WORKERS**

The Contractor shall not use contract funds to employ workers described in Section 274A (h)(3) of the Immigration and National Act, which reads as follows:

“(3) Definition of unauthorized alien – As used in this Section, the term ‘unauthorized alien’ with respect to the employment of an alien at a particular time, that the alien is not at that time either an alien lawfully admitted for permanent residence, or (B) authorized to be so employed by this Act or by the Attorney General.”

## **H.21 NOTIFICATION OF CRITICAL PROGRAMMATIC CONCERNS, RISKS, OR POTENTIAL RISKS**

If any action occurs that creates a cause for critical programmatic concern, risk, or potential risk to BARDA or the Contractor and Incident Report shall be delivered to BARDA.

- Within 48 hours of activity or incident or within 24 hours for a security related activity or incident, Contractor must notify BARDA.
- Additional updates due to COR and CO within 48 hours of additional developments.
- Contractor shall submit within 5 business days a Corrective Action Plan (if deemed necessary by either party) to address any potential issues.

If corrective action is deemed necessary, Contractor must address in writing, its consideration of concerns raised by BARDA within 5 business days.

## **H.22 DISSEMINATION OF INFORMATION (May 2004)**

Other than scientific and technical Sections for which the contractor can assert a copyright under FAR Clause 52.227-14 (c) no information related to data obtained under this contract shall be released or publicized without the prior written consent of the Contracting Officer. In the event that the contractor seeks to publicize data through a scientific or technical Section, the contractor shall provide BARDA, through the COR, with a minimum of thirty (30) business days to review the Section prior to publication.

## **H.23 REGISTRATION WITH THE SELECT AGENT PROGRAM FOR WORK INVOLVING THE POSSESSION, USE, AND/OR TRANSFER OF SELECT BIOLOGICAL AGENTS OR TOXINS**

Work involving select biological agents or toxins shall not be conducted under this contract until the Contractor and any affected subcontractor(s) are granted a certificate of registration or are authorized to work with the applicable select agents.

For prime or subcontract awards to domestic institutions who possess, use, and/or transfer Select Agents under this contract, the institution must complete registration with the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS) or the Animal and Plant Health Inspection Services (APHIS), U.S. Department of Agriculture (USDA), as applicable, before performing work involving Select Agents, in accordance with 42 CFR 73. No Government funds can be used for work involving Select Agents, as defined in 42 CFR 73, if the final registration certificate is denied.

For prime or subcontract awards to foreign institutions who possess, use, and/or transfer Select Agents under this contract, the institution must provide information satisfactory to the Government that a process equivalent to that described in 42 CFR 73 (<http://www.cdc.gov/od/sap/docs/42cfr73.pdf>) for U.S. institutions is in place and will be administered on behalf of all Select Agent work sponsored by these funds before using these funds for any work directly involving the Select Agents. The Contractor must provide information addressing the following key elements appropriate for the foreign institution: safety, security, training, procedures for ensuring that only approved/appropriate individuals have access to the Select Agents, and any applicable laws, regulations and policies equivalent to 42 CFR 73. The Government will assess the policies and procedures for comparability to the U.S. requirements described in 42 CFR Part 73. When requested by the contracting officer, the Contractor shall provide key information delineating any laws, regulations, policies, and procedures applicable to the foreign institution for the safe and secure possession, use, and transfer of Select Agents. This includes summaries of safety, security, and training plans, and applicable laws, regulations, and policies. For the purpose of security risk assessments, the Contractor must provide the names of all individuals at the foreign institution who will have access to the Select Agents and procedures for ensuring that only approved and appropriate individuals have access to Select Agents under the contract.

Listings of HHS select agents and toxins, biologic agents and toxins, and overlap agents or toxins as well as

information about the registration process, can be obtained on the Select Agent Program Web site at <https://www.selectagents.gov/>

#### **H.24 [Reserved]**

#### **H.25 SHARING RESEARCH DATA**

The Contractor's data sharing plan, due date to be determined at contract award, is hereby incorporated by reference. The Contractor agrees to adhere to its plan and shall request prior approval of the Contracting Officer for any changes in its plan.

BARDA endorses the sharing of final research data to serve health. This contract is expected to generate research data that must be shared with the public and other researchers.

BARDA recognizes that data sharing may be complicated or limited, in some cases, by institutional policies, local IRB rules, as well as local, state and Federal laws and regulations, including the Privacy Rule (see HHS-published documentation on the Health Information Privacy at <http://www.hhs.gov/ocr/privacy/index.html>). The rights and privacy of people who participate in BARDA-funded research must be protected at all times; thus, data intended for broader use should be free of identifiers that would permit linkages to individual research participants and variables that could lead to deductive disclosure of the identity of individual subjects.

#### **H.26 CONTINUED BAN ON FUNDING ABORTION AND CONTINUED BAN ON FUNDING OF HUMAN EMBRYO RESEARCH, HHSAR 352.270-13 (December 2015)**

- a. The Contractor shall not use any funds obligated under this contract for any abortion.
  - b. The Contractor shall not use any funds obligated under this contract for the following:
    - (1) The creation of a human embryo or embryos for research purposes; or
    - (2) Research in which a human embryo or embryos are destroyed, discarded, or knowingly subjected to risk of injury of death greater than that allowed for research on fetuses in utero under 45 CFR part 46 and Section 498(b) of the Public Health Service Act (42 U.S.C. 289g(b)).
  - c. The term "human embryo or embryos" includes any organism, not protected as a human subject under 45 CFR part 46 as of the date of the enactment of this Act, that is derived by fertilization, parthenogenesis, cloning, or any other means from one or more human gametes of human diploid cells.
  - d. The Contractor shall not use any Federal funds for the cloning of human beings.
- (End of clause)

#### **H.27 PUBLIC ACCESS TO ARCHIVED PUBLICATIONS RESULTING FROM ASPR FUNDED RESEARCH**

All ASPR-funded investigators shall submit to the NIH National Library of Medicine's (NLM) PubMed Central (PMC) an electronic version of the author's final manuscript, upon acceptance for publication, of any peer-reviewed scientific publications resulting from research supported in whole or in part with Federal funds from the Department of Health and Human Services; Office of the Assistant Secretary for Preparedness and Response. ASPR defines the author's final manuscript as the final version accepted for journal publication, and includes all modifications from the publishing peer review process. The PMC archive will preserve permanently these manuscripts for use by the public, health care providers, educators, scientists, and ASPR. The Policy directs electronic submissions to the NIH/NLM/PMC: <http://www.pubmedcentral.nih.gov>.

## **H.28 INSTITUTIONAL RESPONSIBILITY REGARDING CONFLICTING INTERESTS OF INVESTIGATORS**

The Contractor shall comply with the requirements of 45 CFR Part 94, Responsible Prospective Contractors, which promotes objectivity in research by establishing standards to ensure that investigators (defined as the principal investigator and any other person who is responsible for the design, conduct, or reporting of research funded under BARDA contracts) will not be biased by any conflicting financial interest.

As required by 45 CFR Part 94, the Contractor shall, at a minimum:

- e. Maintain a written, enforceable policy on conflict of interest that complies with 45 CFR Part 94 and inform each investigator of the policy, the investigator's reporting responsibilities, and the applicable regulations. The Contractor must take reasonable steps to ensure that investigators working as collaborators or subcontractors comply with the regulations.
- f. Designate an official(s) to solicit and review financial disclosure statements from each investigator participating in BARDA-funded research. Based on established guidelines consistent with the regulations, the designated official(s) must determine whether a conflict of interest exists, and if so, determine what actions should be taken to manage, reduce, or eliminate such conflict. A conflict of interest exists when the designated official(s) reasonably determines that a *Significant Financial Interest* could directly and significantly affect the design, conduct, or reporting of the BARDA-funded research. The Contractor may require the management of other conflicting financial interests in addition to those described in this paragraph, as it deems appropriate. Examples of conditions or restrictions that might be imposed to manage actual or potential conflicts of interests are included in 45 CFR Part 94, under Management of Conflicting Interests.
- g. Require all financial disclosures to be updated during the period of the award, either on an annual basis or as new reportable Significant Financial Interests are obtained.
- h. Maintain records, identifiable to each award, of all financial disclosures and all actions taken by the Contractor with respect to each conflicting interest 3 years after final payment or, where applicable, for the other time periods specified in 48 CFR Part 4, subpart 4.7, Contract Records Retention.
- i. Establish adequate enforcement mechanisms and provide for sanctions where appropriate. If a conflict of interest is identified, the Contractor shall report to the Contracting Officer, the existence of the conflicting interest found. This report shall be made and the conflicting interest managed, reduced, or eliminated, at least on a temporary basis, within sixty (60) days of that identification.

If the failure of an investigator to comply with the conflict of interest policy has biased the design, conduct, or reporting of the BARDA-funded research, the Contractor must promptly notify the Contracting Officer of the corrective action taken or to be taken. The Contracting Officer will take appropriate action or refer the matter to the Contractor for further action, which may include directions to the Contractor on how to maintain appropriate objectivity in the funded research.

The Contracting Officer may at any time inquire into the Contractor's procedures and actions regarding conflicts of interests in BARDA-funded research, including a review of all records pertinent to compliance with 45 CFR Part 94. The Contracting Officer may require submission of the records or review them on site. On the basis of this review, the Contracting Officer may decide that a particular conflict of interest will bias the objectivity of the BARDA-funded research to such an extent that further corrective action is needed or that the Contractor has not managed, reduced, or eliminated the conflict of interest. The issuance of a Stop Work Order by the Contracting Officer may be necessary until the matter is resolved.

If the Contracting Officer determines that BARDA-funded clinical research, whose purpose is to evaluate the safety or effectiveness of a drug, medical device, or treatment, has been designed, conducted, or reported by an investigator with a conflict of interest that was not disclosed or managed, the Contractor must require disclosure of the conflict of interest in each public presentation of the results of the research.

#### **H.29 BARDA SECURITY REQUIREMENTS FOR FACILITIES**

Security plan must be provided within 60 days and security remediation plan (if needed) must be required within 120 days. All security requirements must be met prior to commencing manufacturing of any product. See Section C for a detailed list of security requirements.

#### **H.30 [Reserved]**

## PART II - CONTRACT CLAUSES

### SECTION I – CONTRACT CLAUSES

#### I.1. FAR 52.252-2, CLAUSES INCORPORATED BY REFERENCE (FEBRUARY 1998)

This contract incorporates the following clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at: <http://www.acquisition.gov/far>. HHSAR clauses at <http://www.hhs.gov/policies/hhsar/subpart352.html>

#### **General Clauses for Cost-Reimbursement Research and Development Contract**

##### a. FEDERAL ACQUISITION REGULATION (FAR) (48 CFR CHAPTER 1) CLAUSES:

Reg	Clause	Date	Clause Title
FAR	52.202-1	Nov 2013	Definitions
FAR	52.203-3	Apr 1984	Gratuities
FAR	52.203-5	May 2014	Covenant Against Contingent Fees
FAR	52.203-6	Sep 2006	Restrictions on Subcontractor Sales to the Government
FAR	52.203-7	May 2014	Anti-Kickback Procedures
FAR	52.203-8	May 2014	Cancellation, Rescission, and Recovery of Funds for Illegal or Improper Activity
FAR	52.203-10	May 2014	Price or Fee Adjustment for Illegal or Improper Activity
FAR	52.203-11	Sept 2007	Certification and Disclosure Regarding Payments to Influence Certain Federal Transactions
FAR	52.203-12	Oct 2010	Limitation on Payments to Influence Certain Federal Transactions
FAR	52.203-13	Oct 2015	Contractor Code of Business Ethics and Conduct
FAR	52.203-14	Oct 2015	Display of Hotline Poster(s)
FAR	52.203-17	Apr 2014	Contractor Employee Whistleblower Rights and Requirement To Inform Employees of Whistleblower Rights
FAR	52.204-1	Dec 1989	Administrative Matters Provisions and Clauses
FAR	52.204-4	May 2011	Printed or Copied Double-Sided on Postconsumer Fiber Content Paper
FAR	52.204-7	Jul 2016	System for Award Management
FAR	52.204-10	Oct 2016	Reporting Executive Compensation and First-Tier Subcontract Awards
FAR	52.204-13	Oct 2016	System for Award Management Maintenance
FAR	52.204-18	Jul 2015	Commercial and Government Entity Code Maintenance
FAR	52.207-1	May 2006	Notice of Standard Competition
FAR	52.209-6	Oct 2015	Protecting the Government's Interests When Subcontracting With Contractors Debarred, Suspended, or Proposed for Debarment
FAR	52.209-9	Jul 2013	Updates of Publicly Available Information Regarding Responsibility Matters
FAR	52.209-10	Nov 2015	Prohibition on Contracting with Inverted Domestic Corporations
FAR	52.210-1	Apr 2011	Market Research
FAR	52.211-5	Aug 2000	Material Requirements
FAR	52.215-2	Oct 2010	Audit and Records – Negotiation
FAR	52.215-8	Oct 1997	Order of Precedence - Uniform Contract Format

FAR	52.215-10	Aug 2011	Price Reduction for Defective Cost or Pricing Data
FAR	52.215-14	Oct 2010	Integrity of Unit Prices (Over the Simplified Acquisition Threshold
FAR	52.215-15	Oct 2010	Pension Adjustments and Asset Reversions
FAR	52.215-18	Jul 2005	Reversion or Adjustment of Plans for Postretirement Benefits (PRB) other than Pensions
FAR	52.215-19	Oct 1997	Notification of Ownership Changes
FAR	52.217-9	Mar 2000	Option to Extend the Term of the Contract
FAR	52.219-8	Oct 2014	Utilization of Small Business Concerns
FAR	52.219-9	Oct 2015	Small Business Subcontracting Plan
FAR	52.219-16	Jan 1999	Liquidated Damages - Subcontracting Plan
FAR	52.219-28	Jul 2013	Post-Award Small Business Program Representation
FAR	52.222-3	Jun 2003	Convict Labor
FAR	52.222-21	Apr 2015	Prohibition of Segregated Facilities
FAR	52.222-24	Feb 1999	Pre-award On-Site Equal Opportunity Compliance Evaluation
FAR	52.222-25	Apr 1984	Affirmative Action Compliance
FAR	52.222-26	Sept 2016	Equal Opportunity
FAR	52.222-35	Oct 2015	Equal Opportunity for Veterans (\$150,000 or more)
FAR	52.222-36	Jul 2014	Equal Opportunity for Workers with Disabilities
FAR	52.222-37	Feb 2016	Employment Reports on Veterans
FAR	52.222-38	Feb 2016	Compliance with Veterans' Employment Reporting Requirements
FAR	52.222-40	Dec 2010	Notification of Employee Rights Under the National Labor Relations Act
FAR	52.222-50	Mar 2015	Combating Trafficking in Persons
FAR	52.222-54	Oct 2015	Employment Eligibility Verification
FAR	52.222-62	Jan 2017	Paid Sick Leave Under Executive Order 13706
FAR	52.223-6	May 2001	Drug-Free Workplace
FAR	52.223-18	Aug 2011	Encouraging Contractor Policy to Ban Text Messaging While Driving
FAR	52.225-13	Jun 2008	Restrictions on Certain Foreign Purchases
FAR	52.225-25	Oct 2015	Prohibition on Contracting with Entities Engaging in Certain Activities or Transactions Relating to Iran—Representation and Certifications
FAR	52.226-1	Jun 2000	Utilization of Indian Organizations and Indian-Owned Economic Enterprises.
FAR	52.227-1	Dec 2007	Authorization and Consent, Alternate 1 (APR 1984)
FAR	52.227-2	Dec 2007	Notice and Assistance Regarding Patent and Copyright Infringement
FAR	52.227-3	Apr 1984	Patent Indemnity
FAR	52.227-11	May 2014	Patent Rights – Ownership by the Contractor
FAR	52.227-14	May 2014	Rights in Data – General
FAR	52.227-15	Dec 2007	Representation of Limited Rights Data and Restricted Computer Software
FAR	52.227-16	June 1987	Additional Data Requirements
FAR	52.228-7	Mar 1996	Insurance – Liability to Third Persons



FAR	52.232-2	Apr 1984	Payments Under Fixed-Price Research and Development Contracts
FAR	52.232-9	Apr 1984	Limitation on Withholding of Payments
FAR	52.232-17	May 2014	Interest
FAR	52.232-20	Apr 1984	Limitation of Cost
FAR	52.232-23	May 2014	Assignment of Claims
FAR	52.232-25	Jan 2017	Prompt Payment
FAR	52.232-33	Jul 2013	Payment by Electronic Funds Transfer–System for Award Management
FAR	52.232.39	Jun 2013	Unenforceability of Unauthorized Obligations
FAR	52.232-40	Dec 2013	Providing Accelerated Payments to Small Business Subcontractors
FAR	52.233-1	May 2014	Disputes
FAR	52.233-3	Aug 1996	Protest After Award, Alternate 1 (Jun 1985)
FAR	52.233-4	Oct 2004	Applicable Law for Breach of Contract Claim
FAR	52.242-13	Jul 1995	Bankruptcy
FAR	52.242-15	Aug 1989	Stop Work Order
FAR	52.242-15 Alt. I	Aug 1989	Stop Work Order
FAR	52.243-1	Aug 1984	Changes – Fixed Price Alternate V
FAR	52.244-2	Oct 2010	Subcontracts, Alternate 1 (Jun 2007)
FAR	52.244-5	Dec 1996	Competition in Subcontracting
FAR	52.244-6	Jan 2019	Subcontracts for Commercial Items
FAR	52.245-1	Apr 2012	Government Property
FAR	52.245-9	Apr 2012	Use and Charges
FAR	52.246-4	Aug 1996	Inspection of Services -- Fixed-Price
FAR	52.246-7	Aug 1996	Inspection of Research and Development -- Fixed-Price
FAR	52.246-9	Aug 1989	Inspection of Research and Development (Short Form)
FAR	52.246-16	Aug 1984	Responsibility for Supplies
FAR	52.246-23	Feb 1997	Limitation of Liability
FAR	52.249-9	Apr 1984	Default (Fixed-Price Research and Development)
FAR	52.249-14	Apr 1984	Excusable Delays
FAR	52.253-1	Jan 1991	Computer Generated Forms

b. DEPARTMENT OF HEALTH AND HUMAN SERVICES ACQUISITION  
REGULATION (HHSAR) (48 CFR CHAPTER 3) CLAUSES:

Reg	Clause	Date	Clause Title
HHSAR	352.203-70	Dec 2015	Anti-Lobbying
HHSAR	352.208-70	Dec 2015	Printing and Duplication
HHSAR	352.211-3	Dec 2015	Paperwork Reduction Act
HHSAR	352.219-70	Dec 2015	Mentor-Protégé Program
HHSAR	352.219-71	Dec 2015	Mentor-Protégé Program Reporting Requirements
HHSAR	352.222-70	Dec 2015	Contractor Cooperation in Equal Employment Opportunity Investigations
HHSAR	352.223-70	Dec 2015	Safety and Health
HHSAR	352.224-70	Dec 2015	Privacy Act
HHSAR	352.224-71	Dec 2016	Confidential Information

HHSAR	352.227-70	Dec 2015	Publications and Publicity
HHSAR	352.233-70	Dec 2015	Choice of Law (Overseas)
HHSAR	352.233-71	Dec 2015	Litigation and Claims
HHSAR	352.237-75	Dec 2015	Key Personnel
HHSAR	352.239-74	Dec 2015	Electronic and Information Technology Accessibility
HHSAR	352.270-5b	Dec 2015	Care of Live Vertebrate Animals.
HHSAR	352.270-6	Dec 2015	Restriction on Use of Human Subjects.
HHSAR	352.270-9	Dec 2015	Non-discrimination for Conscience
HHSAR	352.270-13	Dec 2015	Continued Ban on Funding Abortion and Continued Ban on Funding of Human Embryo Research.

## 1.2. ADDITIONAL FAR CONTRACT CLAUSES INCLUDED IN FULL TEXT

This contract incorporates the following clauses in full text. FEDERAL ACQUISITION REGULATION (FAR) (48 CFR CHAPTER 1) CLAUSES:

### FAR Clause 52.219-28, Post-Award Small Business Program Representation (July 2013)

- a. *Definitions* . As used in this clause--

*Long-term contract* means a contract of more than five years in duration, including options. However, the term does not include contracts that exceed five years in duration because the period of performance has been extended for a cumulative period not to exceed six months under the clause at 52.217-8, Option to Extend services, or other appropriate authority.

*Small business concern* means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts, and qualified as a small business under the criteria in 13 CFR part 121 and the size standard in paragraph (c) of this clause. Such a concern is "not dominant in its field of operation" when it does not exercise a controlling or major influence on a national basis in a kind of business activity in which a number of business concerns are primarily engaged. In determining whether dominance exists, consideration shall be given to all appropriate factors, including volume of business, number of employees, financial resources, competitive status or position, ownership or control of materials, processes, patents, license agreements, facilities, sales territory, and nature of business activity.

- b. If the Contractor represented that it was a small business concern prior to award of this contract, the Contractor shall re-represent its size status according to paragraph (e) of this clause or, if applicable, paragraph (g) of this clause, upon the occurrence of any of the following:
- (1) Within 30 days after execution of a novation agreement or within 30 days after modification of the contract to include this clause, if the novation agreement was executed prior to inclusion of this clause in the contract.
  - (2) Within 30 days after a merger or acquisition that does not require a novation or within 30 days after modification of the contract to include this clause, if the merger or acquisition occurred prior to inclusion of this clause in the contract.
  - (3) For long-term contracts--
    - (i) Within 60 to 120 days prior to the end of the fifth year of the contract; and
    - (ii) Within 60 to 120 days prior to the date specified in the contract for exercising any option thereafter.

- c. The Contractor shall represent its size status in accordance with the size standard in effect at the time of this re-representation that corresponds to the North American Industry Classification System (NAICS) code assigned to this contract. The small business size standard corresponding to this NAICS code can be found at <http://www.sba.gov/content/table-small-business-size-standards>
- d. The small business size standard for a Contractor providing a product which it does not manufacture itself, for a contract other than a construction or service contract, is 500 employees.
- e. Except as provided in paragraph (g) of this clause, the Contractor shall make the representation required by paragraph (b) of this clause by validating or updating all its representations in the Representations and Certifications Section of the System for Award Management (SAM) and its other data in SAM, as necessary, to ensure that they reflect the Contractor's current status. The Contractor shall notify the contracting office in writing within the timeframes specified in paragraph (b) of this clause that the data have been validated or updated, and provide the date of the validation or update.
- f. If the Contractor represented that it was other than a small business concern prior to award of this contract, the Contractor may, but is not required to, take the actions required by paragraphs (e) or (g) of this clause.
- g. If the Contractor does not have representations and certifications in SAM, or does not have a representation in SAM for the NAICS code applicable to this contract, the Contractor is required to complete the following representation and submit it to the contracting office, along with the contract number and the date on which the representation was completed:

**The Contractor represents that it [X] is, [ ] is not a small business concern under NAICS Code 541715 assigned to contract number HHSO100201900021C.**

#### **FAR 52.204-21 Basic Safeguarding of Covered Contractor Information Systems (Jun 2016)**

(a) *Definitions.* As used in this clause--

“Covered contractor information system” means an information system that is owned or operated by a contractor that processes, stores, or transmits Federal contract information.

“Federal contract information” means information, not intended for public release, that is provided by or generated for the Government under a contract to develop or deliver a product or service to the Government, but not including information provided by the Government to the public (such as on public Web sites) or simple transactional information, such as necessary to process payments.

“Information” means any communication or representation of knowledge such as facts, data, or opinions, in any medium or form, including textual, numerical, graphic, cartographic, narrative, or audiovisual (Committee on National Security Systems Instruction (CNSSI) 4009).

“Information system” means a discrete set of information resources organized for the collection, processing, maintenance, use, sharing, dissemination, or disposition of information (44 U.S.C. 3502).

“Safeguarding” means measures or controls that are prescribed to protect information systems.

(b) Safeguarding requirements and procedures.

(1) The Contractor shall apply the following basic safeguarding requirements and procedures to protect covered contractor information systems. Requirements and procedures for basic safeguarding of covered contractor information systems shall include, at a minimum, the following security controls:

- (i) Limit information system access to authorized users, processes acting on behalf of authorized users, or devices (including other information systems).
- (ii) Limit information system access to the types of transactions and functions that authorized users are permitted to execute.
- (iii) Verify and control/limit connections to and use of external information systems.
- (iv) Control information posted or processed on publicly accessible information systems.
- (v) Identify information system users, processes acting on behalf of users, or devices.
- (vi) Authenticate (or verify) the identities of those users, processes, or devices, as a prerequisite to allowing access to organizational information systems.
- (vii) Sanitize or destroy information system media containing Federal Contract Information before disposal or release for reuse.
- (viii) Limit physical access to organizational information systems, equipment, and the respective operating environments to authorized individuals.
- (ix) Escort visitors and monitor visitor activity; maintain audit logs of physical access; and control and manage physical access devices.
- (x) Monitor, control, and protect organizational communications (i.e., information transmitted or received by organizational information systems) at the external boundaries and key internal boundaries of the information systems.
- (xi) Implement subnetworks for publicly accessible system components that are physically or logically separated from internal networks.
- (xii) Identify, report, and correct information and information system flaws in a timely manner.
- (xiii) Provide protection from malicious code at appropriate locations within organizational information systems.
- (xiv) Update malicious code protection mechanisms when new releases are available.
- (xv) Perform periodic scans of the information system and real-time scans of files from external sources as files are downloaded, opened, or executed.

(2) *Other requirements.* This clause does not relieve the Contractor of any other specific safeguarding requirements specified by Federal agencies and departments relating to covered contractor information systems generally or other Federal safeguarding requirements for controlled unclassified information (CUI) as established by Executive Order 13556.

(c) *Subcontracts.* The Contractor shall include the substance of this clause, including this paragraph (c), in subcontracts under this contract (including subcontracts for the acquisition of commercial items, other than

commercially available off-the-shelf items), in which the subcontractor may have Federal contract information residing in or transiting through its information system.

(End of clause)

## **I.2. ADDITIONAL HHSAR CONTRACT CLAUSES INCLUDED IN FULL TEXT**

### **HHSAR 352.231-70 – Salary Rate Limitation (Dec 2015)**

- i. Pursuant to the current and applicable prior HHS appropriations acts, payment of the direct salary of an individual at a rate in excess of the Federal Executive Schedule Level II in effect on the date Government funding was initially obligated to this Agreement is an unallowable cost under this Agreement and shall be addressed in accordance with Article.
- ii. For purposes of the salary rate limitation, the terms “direct salary,” “salary,” and “institutional base salary,” have the same meaning and are collectively referred to as “direct salary”, in this clause. An individual’s direct salary is the annual compensation that the Recipient pays for an individual’s direct effort (costs) under the award. Direct salary excludes any income that an individual may be permitted to earn outside of duties to the Recipient. Direct salary also excludes fringe benefits, overhead, and general and administrative expenses (also referred to as indirect costs or facilities and administrative [F&A] costs).  
  
Note: The salary rate limitation does not restrict the salary that an organization may pay an individual working under a Government award; it merely limits the portion of that salary that may be paid with Federal funds.
- iii. The salary rate limitation also applies to individuals under Sub-Recipient Agreements except to the extent that that a Sub-Recipient Agreement is awarded on a fixed-price basis without analysis of labor costs. If this is a multiple-year award, it may be subject to unilateral modification by the CO to ensure that an individual is not paid at a rate that exceeds the salary rate limitation provision established in the HHS appropriations act in effect when the expense is incurred regardless of the rate initially used to establish Agreement funding.
- iv. See the salaries and wages pay tables on the U.S. Office of Personnel Management Web site for Federal Executive Schedule salary levels that apply to the current and prior periods.

### **PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACHMENTS**

#### **SECTION J - LIST OF ATTACHMENTS**

The following documents are attached and incorporated in this contract:

1. Statement of Work, dated 17 January 2019
2. Sample Invoice/Payment Request
3. Payment Schedule

**PART IV - REPRESENTATIONS AND INSTRUCTIONS**

**SECTION K - REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS**

[Reserved]

**End of Contract**

## **Attachment 1**

### **Biomedical Advanced Research and Development Authority (BARDA) Broad Agency Announcement BAA-18-100-SOL-00018**

#### **Sepsis Institute – Life-Saving Sepsis Education Across the Continuum of Care Area of Interest #2 (Solving Sepsis)**

#### **Contractual Statement of Work**

### **1.0 PREAMBLE**

Independently, and not as an agent of the government, the contractor shall furnish all necessary services; qualified professional, technical, and administrative personnel; and material, equipment, and facilities not otherwise provided by the government under the terms of this contract, as needed to perform the tasks set forth below.

In accordance with the terms and conditions set forth in Section B, the government reserves the right to modify the budget, progress, schedule, or milestones to add or delete processes, schedules, or deliverables if the need arises. Because of the nature of this research and development (R&D) contract and the complexities inherent in this and prior programs, at designated milestones the government will evaluate whether work should be redirected or removed, or whether schedule or budget adjustments should be made. The government reserves the right to change the product, process, schedule, or events to add or delete part or all of these elements as the need arises. Such changes shall be subject to FAR 52.243-1.

### **1.1 OVERALL OBJECTIVES AND SCOPE**

The overall objective of this contract is to create content for the Sepsis Institute as a portal for healthcare provider education on the recognition, treatment and management of sepsis. The “Sepsis Institute” refers to a repository and online portal for educational courses, toolkits, and other similar materials on sepsis. The intent behind the Sepsis Institute is to offer quality, evidence-based education and training to health providers across the continuum of care – that is, from recognition prehospital by primary care practitioners or skilled nursing facility staff, during transport by emergency medical services (EMS) personnel to emergency departments, to in-hospital acute care, and post-hospital care. Virtually all medical and allied health professionals are in a position to suspect and identify the symptoms of sepsis and set treatment protocols in motion.

Sepsis Alliance will create content for “training modules” and “webinars” for the Sepsis Institute in order to prepare the healthcare community for widespread infection and sepsis during a national health emergency. Although sepsis is the 3<sup>rd</sup> leading cause of death in the United States, education about sepsis is a minor component, if present at all, in training curriculums for most healthcare providers. The Sepsis Institute will expand professional education around sepsis by offering high-quality evidence-based education and training for healthcare providers across the continuum of care.

The scope of work for this contract includes the creation of content for the Sepsis Institute educational portal for healthcare providers. This will include the production of 14 new educational webinars and 7 training modules on sepsis.

“Webinars” refer to lecture-form presentations by an expert or experts on specified material on a targeted subject.

“Training modules” or “modules” refer to produced program packages that integrate content from multiple sources and content experts. Training modules are lesson-based and training-oriented and



may include, where deemed appropriate by Sepsis Alliance, integration of existing video, case studies and scenarios, and pre- and post-program quizzes. Training modules may also include collateral materials like downloadable posters, infographics and badge buddies.

The audience for webinars and training modules will depend on the subject matter covered and content will be pertinent to the subject at hand. A system of awarding continuing education credit for select materials will be established through the Sepsis Institute portal.

The R&D effort for the Sepsis Institute will progress in phases that cover the base performance segment to be labeled Contract Line Item Number (CLIN) 0001. The scope of work is broken into the following phases:

- I. Planning AIM 1 and AIM 2
- II. Execution AIM 3, AIM 4, and Aim 5

## **2.0 PLANNING AND EXECUTION**

### **1. PHASE I: Planning**

**AIM 1:** Sepsis Alliance prepares a detailed project plan for the development of the Sepsis Institute.

February 1, 2019 – March 1, 2019

In order to improve sepsis education for healthcare professionals, Sepsis Alliance will develop content for the Sepsis Institute.

Sepsis Alliance will prepare a detailed project plan covering the project that will specify the timeline for i) the development of new webinars and training modules on sepsis recognition, treatment and management and, (ii) the implementation of a functional program to allow users to obtain continuing education credit.

**Success criteria for completion of AIM 1:** Project plan will clearly state the proposed project and timeline and Gantt chart is created for plan

**Deliverable (AIM 1):** Detailed project plan and Gantt chart to DRIVE within 30 days of effective date of contract.

**AIM 2:** Sepsis Alliance prepares the Sepsis Institute for administering continuing education credit

February 1, 2019 – June 30, 2019

**2. Sepsis Alliance begins administrative set up to award continuing education credit.**

Sepsis Alliance will prepare the Sepsis Institute for the administration of continuing education (CE) credit. Initially, CE credit for nurses and for EMS personnel will be offered. Nursing CE will be offered from the California Board of Registered Nursing directly through the Sepsis Institute portal. Continuing education credit for EMS personnel will be offered through a partnership with an established provider which is currently in process. Sepsis Alliance will pursue partnerships with organizations currently accredited for CE for physicians and pharmacists in order to offer CE to those providers in the most time and cost-effective manner for initial year of the Sepsis Institute.

Existing educational materials will be selected and content updated to meet continuing education requirements. This includes:

- Content review to ensure it is up-to-date

- Appropriate webinar length
- Verification of learning objectives
- Current CV for webinar speaker(s)
- Complete Continuing Education Course Approval form (listing title, description, objectives, outline, speaker name/information, course length)

**Success criteria for completion of AIM 2:** Sepsis Alliance demonstrates that the Sepsis Institute is prepared to assist with the administration of CE credits.

**Deliverable (AIM 2):** Report delivered to DRIVE on continuing education capabilities and anticipated data to be collected for webinar and training module usage tracking.

## 2. PHASE II: Execution

**AIM 3:** Sepsis Alliance determines content of webinars and training modules.

July 1, 2019 – November 30, 2019

**3a.** Sepsis Alliance determines content of webinars and training modules that will address the most urgent needs in sepsis education for providers.

Sepsis Alliance will conduct ongoing research to identify topics and subject matter experts to develop content for new webinars and modules. The Sepsis Institute will cover sepsis via subject-specific and provider-specific webinars and training modules. Depending on the content, individual webinars or training modules will address target audiences such as prehospital and emergency services providers, primary care practitioners, skilled nursing facility staff, in-hospital acute care or post-hospital care staff, covering the continuum of care through the complete library of webinars and training modules. New educational materials will be directed towards groups and subject matter that will have the greatest impact to improve management of sepsis.

Potential subjects to be covered in training modules include:

- Sepsis in Disaster Medicine (to be developed in consultation with BARDA and ASPR, detailed in Aims 3b and 4b)
- Sepsis Emergency Preparedness (developed in consultation with BARDA and ASPR, detailed in Aims 3b and 5b)
- Pediatric sepsis – sepsis in children presents differently depending on the age of the child; a module is anticipated for provider education on recognizing and treating sepsis in the pediatric population
- Sepsis for primary care providers – primary care providers are on the front lines of sepsis recognition and management. This becomes more important in the event of a national health crisis; training for this provider population is anticipated

Additional potential topics for webinars or training modules include (i) sepsis in vulnerable populations (e.g. cancer patients, during pregnancy), (ii) predictive analytics and artificial intelligence for improved sepsis detection, and (iii) patient care post-sepsis.

Sepsis Alliance will engage with organizational partners in content development for webinars and modules. Partners with whom we already have an existing relationship include: Centers for Disease Control (CDC), Society for Critical Care Medicine (SCCM), Infusion Nurses Society, Children's Hospital Association, MD Anderson Cancer Institute, Home Care Association of New York, Ohio Hospital Association, National Association of Emergency Medical Technicians (NAEMT), Amputee Coalition, and Society for Healthcare Epidemiology of America (SHEA). Other organizations that we anticipate working with include American

College of Chest Physicians, Physical Therapists Association, American College of Gynecologists (ACOG), Infectious Disease Society of America (IDSA), and Association for Professionals in Infection Control and Epidemiology (APIC). Survey results on topics requested for future programs from previous webinar attendees will also be considered. The Sepsis Alliance core team will determine the final topic list for webinars and training modules.

Webinars are developed by subject matter experts and planned in collaboration with the internal Sepsis Alliance clinical team. Training module content is reviewed by a Sepsis Alliance team composed of clinical members of the Sepsis Alliance Board of Directors, Advisory Board and the Sepsis Coordinator Network Advisory Board.

The Sepsis Alliance core team will determine the finalized content for the completed training modules. Exceptions for the training module on Disaster Medicine and Emergency Preparedness (training module #5) are detailed in Aims 3b and 4b.

**3b.** Sepsis Alliance collaborates with BARDA and ASPR on early development of Disaster Medicine and Emergency Preparedness training module (training modules #5).

The development of the training module on Disaster Medicine and Emergency Preparedness may include engagement with BARDA and ASPR and other relevant suggested parties for feedback on content. Sepsis Alliance will seek engagement with these groups on content development before production of these training modules begins.

**3c.** Webinars and training modules described in this AIM 3 launched.

Sepsis Alliance will post the webinars and training modules produced in accordance with AIM 3 to the public, making the information contained in these webinars and modules accessible to persons with disabilities, as discussed below. In addition to DRIVE branding, other funders and partners may also be acknowledged and branded throughout the Sepsis Institute.

The launch of new webinars and training modules shall be done through the Sepsis Institute and widely promoted through the [Sepsis Alliance website](https://sepsis.org) (sepsis.org), the Sepsis Coordinator Network website ([sepsiscoordinatornetwork.org](https://sepsiscoordinatornetwork.org)), the Sepsis Alliance newsletter, through social media via Facebook and LinkedIn and through partner organizations such as Daisy Foundation and state hospital associations. Sepsis Alliance will also develop a promotion plan for the release of each webinar and training module using the websites, social media outlets, and partners mentioned above.

**Success criteria for completion of AIM 3:** Content plan for webinars and training modules is developed. Webinars 1-4 and training modules 1,2 are posted to Sepsis Institute portal.

**Deliverable (AIM 3):** Webinars 1- 4 and training modules 1,2 delivered to DRIVE; and CE credit for nurses is available directly through the Sepsis Institute.

**AIM 4:** Sepsis Alliance produces additional webinar and training module content for the Sepsis Institute.

December 1, 2019 – May 31, 2020

**4a.** Sepsis Alliance will work to produce new webinars and training modules based on the subject matter expert and DRIVE input identified in Aim 3.

Production for each webinar includes:

- Identification of subject matter expert(s)/ webinar presenter(s)
- Content clearances and presenter releases obtained
- Collaboration with presenter to develop webinar content and presentation slides

- Learning objectives established
- Interactive questions/ activities determined
- Webinar broadcast and recording

Production for training modules will be similar with the addition of:

- Creation and integration of content testing, including pre- and post-program tests
- Identification and licensing of required visual content
- Script creation for presentation
- Engagement of narrator for presentation (if different from expert speaker)
- Conversion of program to movie file

Sepsis Alliance shall use commercially reasonable efforts to bring the webinars and modules developed under this Contract and posted to the Sepsis Institute into compliance with Section 508 IT Accessibility Standards. These efforts shall be limited to sending PowerPoint and PDF files to a selected vendor for 508 remediation, sending webinar files to a selected vendor for captioning, and sending training modules to a selected vendor for captioning and the addition of audio description when necessary.

**4b.** Sepsis Alliance provides opportunity for draft review of training module on Disaster Medicine and Emergency Preparedness (training module #5) by BARDA and ASPR.

Sepsis Alliance will provide a training module on Disaster Medicine and Emergency Preparedness (training module #5) to BARDA and ASPR for review and feedback. This may include a rough draft of the presentation (script or outline prior to production) of this training module. Sepsis Alliance will consider feedback and adjustments to the training module within constraints of the training module budget.

**Success criteria for completion of AIM 4:** Completion of production of webinars 5-8 and training modules 3,4 and training module 5 (Disaster Medicine/ Emergency Preparedness). Webinars 5-8 and training modules 3,4 posted to Sepsis Institute portal.

**Deliverable (AIM 4a):** Webinars 5-8 and training modules 3,4 delivered to DRIVE.

**Deliverable (AIM 4b):** Training module #5 (Disaster Medicine/ Emergency Preparedness) delivered to DRIVE.

**AIM 5:** Sepsis Alliance completes the production of additionally developed content for the Sepsis Institute and publishes draft final project report and final report based on then-existing usage data (“Draft Final Report,” “Final Report”).

June 1, 2020 - April 30, 2021

**5a.** Sepsis Alliance completes content production for webinars 9-12 and training module 6 for the Sepsis Institute.

Following the steps outlined in Aim 4, the webinars 9-12 and training module #6 will be produced.

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**5b.** Sepsis Alliance completes production of training module #7.

Following the steps outlined in Aim 4, training module #7 will be produced.

**5c.** Sepsis Alliance will work to produce 2 webinars on topics related to COVID-19.

Sepsis Alliance will produce 2 webinars on current topics related to COVID-19 (webinars 13 and 14), following the steps outlined in Aim 4. The webinars will be offered for continuing nursing education credit and will be uploaded to the Sepsis Institute as enduring courses.

**5d.** Sepsis Alliance prepares Final Report for submission to DRIVE.

The Final Report to be delivered to DRIVE will include analysis of data collected to date about participant usage and learning metrics from Sepsis Institute materials. We anticipate data collection to begin at or around the time of launch for a webinar or training module. Usage data collected over a minimum of 30 days will be included in reports. Webinar or training modules with fewer than 30 days of usage data at 45 days prior to the report due date will be excluded from the Draft Final Report and Final Report.

Available data and analysis will likely include:

- Descriptive analysis of users of the Sepsis Institute portal, including number of users, clinical specialties, and practice settings
- Raw numbers of users for individual webinars and training modules, as well as descriptive information such as clinical specialty and practice setting
- Metrics of user completion and performance on training module assessments
- Analysis of user self-assessments of knowledge gained and likelihood for practice change based on learning

The Draft Final Report will also include suggestions for future methods of analysis and metrics to be assessed for evaluation of program performance. The Draft Final Report will be submitted to DRIVE 30 calendar days prior to the contract end date.

The Final Report will be delivered to DRIVE on or before the completion date of the contract.

**Success criteria for completion of AIM 5:** Completion of production of remaining webinars and training modules and preparation of Final Report.

**Deliverable (AIM 5a):** Webinars 9-12 and training module 6 delivered to DRIVE.

**Deliverable (AIM 5b):** Training module #7 delivered to DRIVE.

**Deliverable (AIM 5c):** Webinars 13 and 14 on COVID-19 topics delivered to DRIVE.

**Deliverable (AIM 5d):** Final Report with analysis of Sepsis Institute usage to date delivered to DRIVE.

### **3.0 ADDITIONAL REQUIREMENTS**

The contractor shall provide the following as outlined below in the support of its work to furnish the contract deliverables specified in Aims 1-5, as applicable:

#### **3.1 PROGRAM MANAGEMENT**

- 3.1.1 The overall management, integration, and coordination of all contract activities, including a technical and administrative infrastructure to ensure the efficient planning, initiation, implementation, and direction of all contract activities;
- 3.1.2 A principal investigator (PI) or project manager (PM) responsible for project management, communication, tracking, monitoring, and reporting on status, progress, and modification to the project requirements and timelines, including projects undertaken by subcontractors. The contract deliverables list identifies all contract deliverables and reporting requirements for this contract;
- 3.1.3 A project manager with responsibility for monitoring and tracking day-to-day progress and timelines; coordinating communication and project activities; costs incurred; and program management. The contract deliverables list identifies all contract deliverables and reporting requirements for this contract;
- 3.1.4 A BARDA liaison with responsibility for effective communication with the Contracting Officer (CO) and Contracting Officer's Representative (COR). The liaison may be the PM;
- 3.1.5 Administrative and legal staff capability with responsibility for developing compliant

- subcontracts, consulting, and other legal agreements; ensuring timely acquisition of all proprietary rights, including intellectual property (IP) rights; and reporting all inventions made in the performance of the contract;
- 3.1.6 Administrative staff capability with responsibility for financial management and reporting on all activities conducted by the contractor and any subcontractors;
- 3.1.7 Contract Review Meetings;
- 3.1.7.1 The contractor shall participate in regular meetings to coordinate and oversee the contract effort conjointly with the CO and COR. Such meetings may include, but are not limited to, meeting of the contractors and subcontractors to discuss product development, meetings with individual contractors and other government officials to discuss the technical and ethical aspects of the program; and meetings with technical consultants to discuss technical data provided by the contractor; and
- 3.1.7.2 The contractor shall participate in teleconferences every two weeks with the CO and COR to discuss the performance of the contract. Teleconferences or additional face-to-face meetings may be more frequent at the request of the CO.
- 3.1.8 Gantt Chart
- 3.1.8.1 Within 30 calendar days of the effective date of the contract, the contractor shall submit a first draft of an updated Gantt Chart to the CO and COR for review and comment. The Gantt Chart shall be incorporated into the contract and will be used to monitor performance of the contract. The contractor shall include the key milestones and Go/No-Go Decision Gates.
- 3.1.8.2 Project Management Plan: In the management of this contract, the contractor shall utilize Project Progress Management tools/techniques to track and monitor the cost and schedule of the project. The contractor and the government agree that at a minimum, the contractor shall utilize the cost and schedule tools/techniques in the contract deliverable for project management purposes. The contractor shall submit the project progress management report to the CO and COR on a monthly basis.
- 3.1.9 Decision Gate Reporting: Upon completion of a stage of the product development, as defined in the agreed upon Gantt Chart, the contractor shall prepare and submit to the CO and COR a Decision Gate Report that contains (i) sufficient detail, documentation, and analysis to support successful completion of the stage according to the predetermined qualitative and quantitative criteria that were established for Go/No-Go decision making; and (ii) a description of the next stage of product development to be initiated and a request for approval to proceed to the next stage of product development.
- 3.1.10 Risk Management Plan: The contractor shall develop a risk management plan within 90 days of contract award highlighting potential problems and/or issues that may arise during the life of the contract; their impact on cost, schedule, and performance; and appropriate remediation plans. This plan should reference relevant WBS elements where appropriate. Updates to this plan shall be included, at a minimum, on a quarterly basis (every three months) in the monthly Project Status Report (as applicable and specified in 3.1.11).
- 3.1.11 Monthly and Annual Project Status Reports: The contractor shall deliver Project Status Reports on a monthly basis. The reports shall address the items below cross referenced to the SOW, WBS, or other relevant Project Management Plan tool(s):
- i. Executive summary highlighting the progress and issues relevant to the work.
  - ii. Progress in meeting contract milestones, detailing the planned progress and actual progress during the reporting period, explaining any differences between

- the two and corrective steps.
  - iii. Updated Risk Management Plan (every three months).
  - iv. Three-month rolling forecast of planned activities.
- 3.1.12 Data Management: The contractor shall develop and implement data management and quality control systems/procedures, including transmission, storage, confidentiality, and retrieval of all contract data;
- 3.1.13 Provide for the statistical design and analysis of data resulting from the research; and
- 3.1.14 Provide raw data or specific analyses of data generated with contract funding to the CO and COR, upon request.

## Attachment 2

### SAMPLE INVOICE REQUEST

<p>(a) Designated Billing Office Name and Address:          DHHS/OS/ASPR/BARDA          ATTN: Contracting Officer          O'Neill House Office Building          Washington, DC 20515</p> <p>(b) Contractor's Name:          _____</p> <p>Contractor's Address          _____          _____</p> <p>Contractor's EIN: _____</p> <p>Contractor's CAGE: _____</p> <p>Contractor's DUNS: _____</p> <p>Point of Contact Name, Title, Email, Phone:          _____          _____          _____</p>	<p>(c) Invoice No.: _____</p> <p>(d) Date Invoice Submitted: _____</p> <p>(e) Contract No.: _____</p> <p>(f) Current Contract Period of Performance:          _____</p> <p>(g) Total Price of Contract: _____</p> <p>(h) Total Fixed-Fee (if applicable): _____</p> <p>(i) Invoicing Type: Three-Way Match</p> <p>(j) Office of Acquisitions:          DHHS/OS/ASPR/BARDA          ATTN: Contracting Officer          O'Neill House Office Building          Washington, DC 20515</p> <p>(k) Central Point of Distribution: N/A</p>
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(l) This invoicing request represents reimbursable costs for the period from:

CLIN No.	Unit	(m) Current Amount	(n) Cumulative Amount	(o) Total Contract Amount
_____	_____	_____	_____	_____

Brief description of the work/deliverable(s) being invoiced:

I certify that all payments are for appropriate purposes and in accordance with the contract.

\_\_\_\_\_  
 (Name of Official)

\_\_\_\_\_  
 (Title)

**Note:** Please attach supporting documents and details as specified in the contract to support the work/deliverable(s) being invoiced



### Attachment 3

#### Schedule of Payments

Pursuant to FAR 52.232-2, payments will be made upon submission of an acceptable invoice for partial delivery of work, as outlined below in the table. The remaining balance will be paid only upon receipt and acceptance of the (1) Final Data Submission Package & (2) Final Report as described in Section F.2 of the subject contract:

Partial Payment	SOW Deliverable	Description	Partial Payment Amount
1	<b>AIM 1:</b> Sepsis Alliance prepares a detailed project plan for the development of educational materials for the Sepsis Institute.	Project Plan/ Gantt chart	\$85,448
2	<b>AIM 2:</b> Sepsis Alliance prepares the Sepsis Institute for administering continuing education.	Report on continuing education capabilities and anticipated data to be collected for webinar and training module usage tracking	\$85,448
3	<b>AIM 3:</b> Sepsis Alliance determines content of webinars and training modules.	Webinars 1- 4 and training modules 1,2 are checked for 508 compliance, uploaded and CE credit for nurses is made available	\$105,448
4	<b>AIM 4a:</b> Sepsis Alliance produces additional webinar and training module content for the Sepsis Institute.	Webinars 5-8 and training modules 3,4 are checked for 508 compliance and uploaded	\$100,448
5	<b>Aim 4b:</b> Sepsis Alliance provides opportunity for draft review of training module on Disaster Medicine/ <b>Emergency Preparedness</b> (training module #5) by BARDA and ASPR.	Training Module #5 (Disaster Medicine/ <b>Emergency Preparedness</b> )	\$15,000
6	<b>AIM 5a:</b> Sepsis Alliance completes the production of additionally developed content for the Sepsis Institute.	Webinars 9-12 and training module 6 are checked for 508 compliance and uploaded	<b>\$60,456</b>
7	<b>AIM 5b:</b> Sepsis Alliance <b>completes production of training module #7.</b>	Training Module <b>#7 is checked for 508 compliance and uploaded</b>	<b>\$30,000</b>
8	<b>AIM 5c:</b> Sepsis Alliance will produce 2 webinars on topics related to COVID-19.	Webinars 13 and 14 on <b>COVID-19</b> are checked for 508 compliance and uploaded.	<b>\$25,000</b>
9	<b>AIM 5d:</b> Sepsis Alliance prepares Final Report for submission to DRIVE.	Final Report with analysis of Sepsis Institute usage to date	\$40,000